

Appl. No. 10/700,909
Response to Restriction Requirement dated 11-02-2006
Attorney Docket No. CV06093US 01 (4686-050109)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/700,909 Confirmation No. 7785
Applicants : John R. Erbey II et al.
Filed : November 4, 2003
Title : Methods and Therapeutic Combinations for the Treatment of
Autoimmune Disorders
Group Art Unit : 1617
Examiner : Carlie K. Huynh
Customer No. : 28289

Fax: 571-273-8300
MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT AND ELECTION OF SPECIES

Sir:

This is in response to the Office Action mailed on November 2, 2006, in the above-identified patent application.

Claims 1-26 are pending in this application.

A two-way restriction requirement was set forth at pages 2-4 of the Office Action. For brevity, these rejections are not repeated herein but reference is made to the Office Action.

Applicants respectfully traverse the restriction requirement and election of species requirement and assert that there is no undue burden on the examiner to search the subject

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Michele Susko	
(Name of Person Mailing Paper)	
<i>Michele Susko</i>	11/28/2006
Signature	Date

{W0315818.1}

- 1 -

PAGE 3/4 * RCVD AT 11/28/2006 2:17:54 PM [Eastern Standard Time] * SVR:USPTO-EFAXF-6/44 * DNIS:2738300 * CSID:412 471 4094 * DURATION (mm-ss):00-52

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FACSIMILE INFORMATION SHEETName of Individual: Mail Stop AmendmentCompany: USPTOCity and State: Alexandria, VAFacsimile Number: 571-273-8300From: Michele SuskoTotal Number of Pages: 4 (including Information Sheet)Date Transmitted: November 28, 2006Client No.: 4686File No.: 050109Message:

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{W0079786.1}

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/700,909	
	Filing Date	November 4, 2003	
	First Named Inventor	John R. Erbey II et al.	
	Art Unit	1617	
	Examiner Name	Carl K. Huynh	
Total Number of Pages in This Submission	3	Attorney Docket Number	CV06093US 01 4686-050109

ENCLOSURES (check all that apply)		
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
Signature			
Printed Name	Ann M. Cannoni		
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{W0317608.1}

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